Wirral Health and Care Commissioning: Quality Impact Assessment Tool v1

Overview

The QIA is designed to provide an assessment of the perceived impact that a service development will have on the quality of care delivered. Whatever the outcome of the threshold result, there may be individual indicators rated as having a negative impact on quality. In that case, due consideration should be given to all of these to establish how the proposal could be changed to improve the quality impact or to ensure that on balance, the scheme is worth pursuing. In these cases, the reason for the decision to go ahead should be clearly documented. The tool is broken down into two stages.

STAGE 1

Stage 1 is the initial assessment to quantify any potential impacts (positive, neutral or negative) on the quality from any proposal to change the way services are commissioned and/or delivered. Quality is described in 8 areas, all of which must be assessed at stage 1. Were potential positive or neutral impacts are identified at Stage 1, rationale needs to be provided for each impact identified. Where negative impacts are identified they need to be risk assessed using the risk scoring matrix to reach a total risk score. If any potential negative risk score identified at Stage 1 is equal to or greater than 8 you must complete Stage 2 of the QIA also.

If the risk does not calculate to equal to or greater than 8, only Stage 1 requires completion.

STAGE 2

Stage 2 must be completed for any potential negative risk scores identified at Stage 1 that are greater (>) than 8. You will need to describe what the potential negative impacts are and the mitigating strategies and monitoring arrangements are to reduce the impact of any potential negative risks. By identifying and risk assessing any potential negative impacts it will ensure that on balance, the scheme is worth pursuing and the reasons for the decision to go ahead have been carefully considered

STAGE 3

An evaluation post implementation is necessary once a scheme/project/service is in initial stage and fully implemented, the Commissioning Manager/Project Lead, as part of best practice, should revisit the QIA as part of the monitoring of the service. Taking into consideration whether any of the impacts have changed for e.g. Patient experience, waiting times, performance analysis. Revisiting the impact assessments can help identify any new risks that require mitigating as the service or project continues.

Scoring

A total score is achieved by assessing the level of impact and the likelihood of this occurring and assigning a score to each. These scores are multiplied to reach a total score. The following tables define the impact and likelihood scoring options and the resulting score: -

LIKELIHOOD		IMPACT		
1	RARE	1	MINOR	
2	UNLIKELY	2	MODERATE / LOW	
3	MODERATE / POSSIBLE	3	SERIOUS	
4	LIKELY	4	MAJOR	
5	ALMOST CERTAIN	5	FATAL / CATASTROPHIC	

Risk score	Category			
1 - 3	Low risk (green)			
4 - 6	Moderate risk (yellow)			
8 - 12	High risk (orange)			
15 - 25	Extreme risk (red)			

A fuller description of impact scores can be found in the 'Risk Scoring Matrix' tab.

		IMPACT				
		1	2	3	4	5
	1	1	2	3	4	5
_	2	2	4	6	8	10
8	3	3	6	9	12	15
5	4	4	8	12	16	20
볼	5	5	10	15	20	25